



DEAFESTIVAL – KENTUCKY

Volunteer Application

Louisville, Kentucky - July 1, 2006

Festival Set-Up	Festival Hours	Festival Breakdown
Friday 6/30/06	Saturday 7/1/06	Saturday 7/1/06
10:00 am - 4:00 pm	10:00 am - 6:00 pm	6:00 pm - 7:00 pm

Please **PRINT** clearly:

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone () _____ Home () _____ Fax () _____

Email Address: _____

Volunteer Information:

☐ Female ☐ Deaf T-Shirt Size (Circle One):
 ☐ Hard of Hearing S M L XL
☐ Male ☐ Oral
 ☐ Hearing XXL XXXL
☐ Age

Communication Skills:

_____ ASL/PSE (Circle Level) Beginning Intermediate Advanced
 _____ Oral _____ Cued Speech _____ Deaf / Blind
 _____ Spoken English Only

<u># Hours Volunteer:</u> (Circle One)	<u>Times Volunteer</u> (Circle All That Apply):	<u>Areas Willing to Volunteer</u> (Circle All That Apply)
2 hours*	Friday 11:00 am - 1:00 pm	SpotLights Program
4 hours	1:00 pm - 3:00 pm	Childrens Program
6 hours	3:00 pm - 5:00 pm	Information Booth
8 hours	Saturday 8:00 am -10:00 am	Studio Artist
10 hours	10:00 am -12:00 pm	Exhibitors
All Day	12:00 pm - 2:00 pm	Technology
	2:00 pm - 4:00 pm	Traffic Control
	4:00 pm - 6:00 pm	Hospitality
	6:00 pm- 8:00 pm	Clean - up

***Note:** You must volunteer four (4) or more hours to receive a free DeaFestival T-Shirt.

You will be notified in writing of acceptance/denial and which area to volunteer by June 15, 2006

I agree that DeaFestival-KY and all its related facilities are to be released from liability in connection with medical treatment and/or accidents on my part. DeaFestival-KY also has my permission to use emergency medical measures on my behalf, if necessary. I agree that DeaFestival has my permission to use pictures, names and/or art forms depicting myself for advertisement purposes.

Signature: _____ Date: _____

Mail signed application to: **KCDHH**
 632 Versailles Road
 Frankfort, Kentucky 40601

For more information go to: <http://www.deafestival.org> or <http://www.kcdhh.ky.gov>